PROCESS RECEIPT AND RETURN

Case 1:08-cv-00144
U.S. Department of Justice
United States Marshals Service

See Instructions for "Service of Process by the U.S. Marshal" on the reverse of this form.

PLAINTIFF -	COURT CASE NUMBER
Averbakh	08C144
DEFENDANT	TYPE OF PROCESS
Chertoff, et al.	s/c
SERVE NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR	DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
U.S. Attorney General	
ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)	
AT Dept. of Justice 950 Pennsylvania Ave. NW. Was	hington, D.C. 20530
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:	Number of process to be
	served with this Form - 285
David Cook	32-4-1
Kenneth Y. Geman & Associates	Number of parties to be
33 N. LaSalle St., Ste. 2300	
Chicago, IL 60602	Check for service
	OE U.S.A.
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING	SESONCE (State Business and Alternate Addresses, All
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING Telephone Numbers, and Estimated Times Available For Service):	Fold
	8-2008 8 2008 Y M
/ 6	To anna Y M
JUL 2	3 8 Zuud   141
	- PARENCE
MICHAEL ]	W. DOBBINS
CLERK, U.S. (	DISTRICT COURT
Rignature of Attorney or other Originator requesting service on behalf of	TELEPHONE NUMBER DATE
<b>▲ PLAINTIFF</b>	
DEFENDANT	01-16-08
SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO	NOT WRITE BELOW THIS LINE
acknowledge receipt for the total Total Process District District Signature of Authori	zed USMS Deputy or Clerk Date
number of process indicated. of Origin to Serve	TD Date
Sign only first USM 285 if more 6 of 6 24 24	01-16-08
than one USM 285 is submitted) No No	
hereby certify and return that I 🗆 have personally served. 💆 logal evidence of service, 🗔 have exc	
on the individual, company, corporation, etc., at the address shown above or on the individual, company,	corporation, etc., shown at the address inserted below.
I hereby certify and return that I am unable to locate the individual, company, corporation, etc	., named above (See remarks below)
Name and title of individual served (if not shown above)	
Name and the of individual served (if not shown above)	A person of suitable age and dis- cretion then residing in the defendant's
	usual place of abode.
Address (complete only if different than shapen above)	Date of Service Time am
Address (complete only lightly on than shown above) Rectified Rectified Cetters	F-22-08
Rectific Cetter Cetter Cetter	F22-08 pm
Rectited Rectific Central	F-22-08
Address-(complete only lightlyen, than shown above) Rectified Rectified Certified and Certified	F22-08 pm
Service Fee Total Mileage Charges   Forwarding Fee   Total Charges   Advance Deposits	F22-08 pm
delicenza centra	Signature of U.S. Monthel & Barrety
Service Fee Total Mileage Charges Forwarding Fee Total Charges Advance Deposits (including efficiences)	Signature of U.S. Monthel & Barrety
Service Fee Total Mileage Charges   Forwarding Fee   Total Charges   Advance Deposits	Signature of U.S. Marshal or Amount of Refund



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## Track & Confirm

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